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Bib Data Sheet

CONFIRMATION NO. 4522

SERIAL NUMBER 09/841,487	FILING DATE 04/24/2001 RULE	CLASS 375	GROUP ART UNIT 2631	ATTORNEY DOCKET NO. Sung 2 (58650)	
APPLICANTS Po-An Sung, San Jose, CA; ** CONTINUING DATA ***** ** FOREIGN APPLICATIONS ***** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 06/19/2001					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		STATE OR COUNTRY CA	SHEETS DRAWING 6	TOTAL CLAIMS 22	INDEPENDENT CLAIMS 3
ADDRESS RICHARD K. WARTHER Allen, Dyer, Doppelt, Milbrath & Gilchrist, P.A. P.O. Box 3791 Orlando, FL 32802-3791					
TITLE Doppler corrected communications receiver and method of removing doppler frequency shift					
FILING FEE RECEIVED 906	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		



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BIBDATASHEET

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** FOREIGN APPLICATIONS *****

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35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged Examiner's Signature <u>[Signature]</u> Initials <u>fw</u>	CA	6	22	3

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 RESTON, VA
 20195

TITLE

Doppler corrected communications receiver and method of removing doppler frequency shift

FILING FEE RECEIVED 906	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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